

SUPPORTS GUIDEBOOK

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SUPPORTS

Supports represent all the behind-the-scenes supportive work activity it takes to bring about successful outcomes. Supports are provided primarily by the "non-direct" service staff who support or actually help achieve desired outcomes for children and families and meet their needs as customers. Supports also develop the Department's and community systems' ability to meet identified needs at a systems level.

Thus, supports are all the activities of "supervisory" and "management" staff that support the protective service worker and protective service work. A significant amount of the support function is accomplished by teams. Supports are provided in two primary ways:

- INDIVIDUAL CASES. Help to individual protective service workers on individual cases through the use of consultation; and
- SYSTEMS. Work to continuously improve the quality of services delivered to children and families at a "systems" level. These systems may include but are not limited to the Department and other public and community agencies.

This chapter gives information about how the "supports" work in conjunction with, and are integral to protective service work. This includes information about the role of the protective service worker, supervisor, central office, consultation, teams, team development, accessing teams, community support and support system evaluation.

All protective service work of the Department focuses on the child and family. Protective service workers are responsible for the protective service work of the Department, and are accountable to their primary customer (child, family and community), and the supports (supervisors and management) are accountable to their primary customers - the protective service workers.

SECTION I

ROLE OF PROTECTIVE SERVICE WORKER

The primary role of the protective service worker is to conduct and complete the identified tasks needed to provide quality services to children and families.

The protective service worker has the responsibility to seek consultation and support when providing services to children and families. This support and consultation is accessible through supervisors and teams. The protective service worker also provides support to other protective service workers through a considerable amount of informal, or formal peer consultation.

Support and consultation are acknowledged and encouraged through the development of teams. Teams are used for problem-solving, information-gathering, and personal support. The protective service workers' responsibilities to the supervisor and teams are to:

- Provide direction;
- Provide accurate information;
- Openly communicate with positive feedback;
- Identify what is needed in order to provide quality services;
- Participate as active members of any team dealing with their individual cases and teams to improve the system.

In addition to participating on individual case consultation teams, it is expected that protective service workers have representation on teams that deal with improving the Department and community systems. Because they bring a unique perspective, protective service workers' participation on teams is a job expectation.

Role of Supervisor

The role of the supervisor is to provide consultation and support to the worker. This support and consultation are provided to individual protective service workers and by facilitating and participating on teams. The supervisor has the following responsibilities:

- Openly communicate and provide feedback;
- Assist in problem-solving and decision-making;
- Advocate for the protective service worker within the Department and the community;
- Take responsibility for specific casework tasks upon request;
- Enhance protective service workers' knowledge and skills through internal and external resources;
- Develop, facilitate, and participate in teams; and
- Insure workers have the tools and resources to provide services to children and families.

The extent of the supervisor's role will vary depending on the style and competence of the worker.

District and Central Office Functions

The primary functions of staff in Central Office are to plan, coordinate and evaluate statewide to insure the most effective and efficient use of State resources to benefit children, families and direct service staff. These Central Office activities occur only with the input and participation with direct service staff (protective service workers) and support staff serving on system support teams from all regions of the state.

Supports for Decision Making Use of Consultation

No single protective service worker or other professional has the necessary knowledge and skills to assess and treat the multifaceted problems presented by families and children. Workers are not expected to have all the answers. Because of the critical nature of decisions made during protective service work, families, staff and the public need to be assured that consultation is provided and available to staff.

Consultation is available to staff through, but not limited to:

- Parents, foster parents and involved children;
- Teams of involved professionals;
- Supervisory support;
- Peers and agency professionals;
- Specialized agency teams;
- Recognized experts called in for specific issues;
- Group staffings; and
- Multidisciplinary teams.

Consultation is used to support families and staff with their decision-making responsibilities regarding specific issues and individual cases. At many points in the case process, the worker will consult as necessary to arrive at decisions that represent the best interests of children and families. Frequent consultation strengthens practice and quality of service provided to children and families.

Consultation is particularly helpful when involved parties disagree about action that should be taken. Consultation is helpful in a multitude of case circumstances where difficult, sensitive issues are involved. A worker will often encounter circumstances where there is a need for specific information about conditions, cultural practices and other issues specific to a child and family. Consultation helps the worker and family to determine the best course of action.

The majority of consultation that will occur on individual cases will be at the local or regional level. There are very few instances in which a worker will be required to seek consultation out of her/his immediate area or region. These expectations are noted within this policy and usually relate to decisions that will require the Department's director, or medical director to determine very sensitive issues such as continuation of life support.

Case Consultation

To assure consistent, quality service to children, families and staff, consultation will occur at designated points in each case when critical decisions affecting the child and family are made. The purpose of consultation is to assure staff, families and the public of a consistent application of Department policy and that consideration of as many factors and ramifications as possible occurs when critical decisions are made. Specific consultation will occur before:

- Recommending removal of a child from the home;
- Recommending returning a child to the home;
- Placing of a child into a foster home, group home or residential facility located in another district;
- Placing of a child into restrictive placements such as hospitals, inpatient treatment facilities (the Primary Care Provider will be the decision maker, the worker will be part of the team), and out of state;
- Requesting an exception to an existing policy;
- Opening a case for ongoing service;
- Changing the permanency objective on a case;
- Taking a relinquishment;
- Recommending termination of parental rights; and
- Closing a case.

Consensus on Decision Making

In most instances, decision-making occurs within a team, which includes the family, child and significant persons. If there is disagreement on a decision made on a case, the worker, the supervisor and other team members will review the case issues and decisions together. Disagreements on decision-making will be resolved with input from the persons having the disagreement. The decision in question will be reviewed on the basis of whether the decision is consistent with:

- The best interests of the child;
- Department policy;
- Current court orders or established protocol; and
- Case plan.

Every attempt will be made to reach consensus with those involved. If consensus is not achieved and the supervisor, worker and team members agree that the decision in question meets the review criteria listed above, the decision will be approved.

If the worker and supervisor cannot achieve consensus on a decision, a separate team or third party to that case that does not have service delivery responsibilities will be activated to review the matter and help reach consensus. The team decision will be final.

Policy Variance

At anytime a protective service worker, supervisory support staff or other management staff believes a state policy is contrary to the best interests of a particular child or family, then permission to deviate from the policy in that instance will be requested. To preserve continuity and consistency in policy application for the Department, policy variance requests will be reviewed by and approved by a team with statewide perspective.

A request to deviate from established policy will be made in writing to the local area representative of this team after consultation with supervisory support staff. The request will include:

1. The circumstances of the child or family;
2. The reason why following current policy is not in the child or family's best interest;
3. The proposed action that deviates from current policy;
4. How the proposed action is in the best interest of the child or family; and
5. Any predicted impact the proposed action is likely to have.

The team will review the request and respond within the time frames requested by the worker. If the deviation from policy is in the child or family's best interest and does not conflict with any existing law, the team will approve the policy variance in a timely manner.

SECTION II

TEAMS

Types of Teams

Teams are an effective and efficient way of providing help in individual cases of addressing the broader, related systems issues. Families will be included to the maximum extent possible on any team.

Teams have a variety of characteristics, which may include:

- Formal teams. Teams that are formally sanctioned to perform a specific purpose or to resolve problems;
- Informal teams. Teams without any official sanction that help resolve problems;
- Internal, or Department teams. Teams made up of only Department-employed staff (including protective service workers);
- External, or community teams. Teams that include both Department employees, families and community members;
- Project, or short-term teams. Teams with a short-term, or specific project nature to their work. These teams include those "convened" to solve a specific problem in a short time;
- Ongoing, or long-term teams. Teams with an ongoing or long-term nature to their work. Such teams include system support teams.

A list of "ongoing" teams includes, but is not limited to the following:

- Case consultation. Provide consultation regarding individual cases. Made up of Department staff with expertise in specific areas (e.g., sexual abuse, foster care placement). Certain case consultation teams may include community professionals.

The following supports have a system focus; they build and develop the system locally and statewide.

- Planning teams. Bring together individuals to plan for meeting service needs;
- Purchase of service, or supplier teams. Identify specific services that can be purchased, and how these can be delivered most effectively and efficiently;
- Training Teams. Assess, plan implement and evaluate training for child and family professionals;
- Community and resource development teams. Develop and mobilize community systems and resources to address the needs of children and families;
- Communication teams. Develop and communicate strategic messages about Department protective service work;
- Assessment and evaluation team. Continuously assess the needs and outcomes of children and families, using enhanced information systems, mutually agreed upon outcomes, etc.;
- Legislation team. Develop strategies and propose legislation that will best meet the needs of children and families;
- Budget and finance team. Develop a comprehensive system for funding and monitoring expenditures of services to children and families;
- Coordination team. Pull together persons for issues regarding child and family services in order to communicate and coordinate services locally and statewide;
- Legal team. Protective service workers, contracted legal support and Department legal staff to develop specific strategies, and implement strategic challenges of cases to most effectively meet the needs of children and families;
- Personnel team. Internal team made up of protective service staff and human resource staff to hire staff to resolve human resource problems and to identify and implement staff development needs;

Teams also have parameters or general guidelines, which may include, but are not limited to the following:

- Support protective service workers, but don't case manage;
- Respond to a variety of protective service worker requests and assume responsibility for completing assignments;
- Team decisions are sufficient for immediate action;
- The team's customer is the protective service worker, who determines if the team's product meets the client's need(s);
- Assume ownership for a variety of system functions (planning, coordination, public communication, evaluation, etc.);
- The team is outcome-focused;
- The protective service worker and team members evaluate the team.

Protective service work is unique and highly specialized, requiring considerable education and training to perform. It occurs within a broad array of services provided in the Department, and an even broader array of services in Nebraska's communities. Because of the highly specialized nature of the work, a number of teams will focus on protective service work. However, these teams must also interact with other Department teams to further the Department's mission, and with broader community organizations to ultimately benefit children and families.

Accessing Teams

Accessibility and timelines are keys to successful teams. Therefore, the only activity a protective service worker must perform to access a team for an individual case is to make oral contact with a protective service supervisor with her request for help. This access means that the protective service supervisor may, or may not be located in the same region as the protective service worker.

It is then the responsibility of that protective service supervisor to begin the steps necessary to ensure that the right team members come together (physically or by phone) to resolve the presenting issue in a timely manner.

The protective service worker has the responsibility to participate in the team and provide necessary information to resolve the issue.

The protective service worker also has the responsibility to notify any protective service supervisor when perceiving an issue with system implications. The protective service worker will also indicate what she/he believes will contribute to the resolving the systems issue, and may participate in a team developed to overcome or resolve the systems issue.

Team Development and Implementation

A team can be developed for any purpose relevant to protective service work. In order to develop teams locally and statewide, each region will designate staff to:

- Coordinate the successful development of teams;
- Successfully implement this policy; and
- Represent the region at the statewide protective service planning, coordination and evaluation team meetings.

The designation of this person(s) will result from a consensus of the protective service staff in the region, and the concurrence of the designated staff person(s). In making this designation, protective service staff will want to consider the knowledge and understanding the person(s) has of this policy. The designated staff person(s) must have the trust and confidence of protective service staff to successfully develop teams and implement this policy in a collegial manner.

The person charged with this coordination will have these responsibilities:

- Identify the knowledge, talents, skills and interest of each protective service staff person within the region;
- Actively recruits staff (with their concurrence) to serve on either case consultation or systems teams or both;
- Identify and recruit community professionals to serve on case consultation and systems teams;
- Share information about identified team resource persons with protective service supervisory staff;
- Initiate and coordinate regional protective service planning, coordination and evaluation team meetings;
- Represent regional protective service interests at statewide protective service planning, coordination and evaluation team meetings;
- Provide feedback or communication to local and regional protective service staff regarding statewide protective service activities.

SECTION III

COMMUNITY SUPPORT

Child abuse and neglect are community problems. CPS plays a key community role in addressing the problems associated with abuse and neglect. This occurs in two ways:

- Coordinating with other agencies to deal with problems; and
- Helping develop the community's understanding and capacity to deal with the problems of its children and families through community development.

Community Coordination

The Nebraska Legislature enacted LB 1184, which mandates the development of local teams of community professionals to deal with:

- Investigation of child abuse and neglect; and
- Treatment of child abuse and neglect.

County attorneys have been charged with developing these teams and the protocols that will be used in local areas.

Protective service workers and support staff will help by participating and coordinating their activities with these teams. To promote the success of these teams, protective service staff will:

- Promote agreement on common goals at the community level (for example, prevent child abuse and neglect, protect children from harm, and reduce risk of maltreatment). In spite of the variety of professions involved, it is possible to agree on common goals;
- Acknowledge and seek to understand professional roles and expertise. In addition to understanding the Department's role, protective service staff will seek to understand the professional roles and expertise of other community professionals;
- Openly communicate. Communication among professionals is crucial if service delivery is to be properly coordinated. Communication among agencies and professionals must be maintained:
 - Formally; formal written agreements and protocols are established to be followed by consenting agencies; and
 - Informally; ongoing informal communication between agencies and professionals within the agencies must be maintained;
- Provide feedback. Good coordination and collaboration among agencies and professionals are based not only on open communication, but also on a system that allows for feedback. Feedback is useful to assess intervention on a case-by-case basis, and to implement changes within the community systems that may help improve service delivery.

Statutory reference: Neb. Rev. Stat. 28-730 (LB 1184).

Community Development

Because the Department plays such a key role in child protective services across the state, it has the opportunity and obligation to help build the community's capacity to deal with the problems associated with child abuse and neglect. As communities assume more responsibility, children and families will have more opportunities to receive the supports they need to avoid the intrusive protective services of the Department.

The Department will help to establish community and resource development teams to build the community's capacity and mobilize resources to meet the needs of children and families at the local level. These teams will be made up of Department employees and community people.

The Department of Health and Human Services has some staff dedicated full time to community development. In addition to the key support role these community developers play, protective

service workers and support staff are a tremendous resource because of their unique knowledge and experience in the field of child abuse and neglect and its causes.

Protective service staff can enhance community development by promoting the use of existing local organizations or the establishment of new local community organizations. The local organizations would:

- Advocate for the needs of children and families within the community;
- Inform and educate the community about the problems, needs and strengths of children and families in the area;
- Work towards developing a comprehensive and coordinated service-delivery system for children and families in the community;
- Periodically assess the needs of children and families in the community;
- Develop short-term and long-range plans to meet the needs of children and families in the community;
- Provide for service delivery when other arrangements cannot be found;
- Raise funds for the delivery of needed services to children and families in the community;
- Develop and implement an ongoing public relations campaign to promote services for children and families.

Ideally, the community resources and development team will work to see that the local community organization consists of:

- Community leaders (selected on the basis of position, reputation and decision-making opportunities);
- Consumers - families and children from the community;
- Service providers and interested professionals;
- General community members interested in these issues.

During community development activities, protective service staff will support the use of a community problem-solving approach, for example, identifying problems and needs through techniques such as surveys; analyzing needs; inventorying resources and identifying gaps; developing strategies; testing feasibility of strategies; and developing and implementing action plans.

SECTION IV

EVALUATION OF DEPARTMENT PROTECTIVE SERVICE SUPPORT SYSTEM

Evaluation of the protective service support system measures the support system's progress and success in achieving protective service outcomes and quality service delivery. All evaluations focus on not only determining success, but also on continuously improving the services delivered. An evaluation team of protective service workers and support staff familiar with the work are responsible for evaluations. All evaluations are conducted in a positive manner.

- Customer Evaluation: The customer evaluation will include customer surveys and focus groups to determine what the ongoing needs of the customer are (see also customer needs identified in each section of the policy), and how they can be better met. These evaluations will be built into the system of supports. Identified customers will include child, family, foster parents, other service providers, etc. (See also customer needs identified in each section of the policy);
- Peer Review and Evaluation: Members of teams will provide review and evaluation of members to promote skill building, professional development, training needs, etc.;
- Individual Support Review and Evaluation: Individuals who are assigned specific support responsibilities (supervision and management) will have their performance evaluated by those for whom they have this responsibility. In addition, these reviews will promote skill-building, professional development, and identification of training needs, etc.;
- Team Evaluation: Team(s) that have been identified as useful throughout the process will be evaluated in terms of the achievement of outcomes, and what processes can be instituted to improve the quality of those outcomes.

Members of the team will conduct these evaluations. Any team that has been identified as "ongoing" will be evaluated at least annually. Any team with a short-term or project focus of less than one year will be evaluated at the end of the project.

- Accountability Review: Because the system of supports is accountable to the protective service workers, these workers will be provided the opportunity to guide, direct and evaluate the Department protective service work and supports. This will be provided through the ongoing use of a protective service planning, coordination and evaluation team (currently "Reframe Steering Committee) which includes protective service workers from across the state.

Once annually, this team will review or evaluate all its activities and those of the Department to determine the Department's relative progress and success in meeting the needs of the protective service work, and how this can be improved to meet the Department's mission of leading in quality service.